

EARLY VOTING BALLOT TRANSPORT STATEMENT

~This form is to be completed each time the ballot box seal is broken for ballot transport~

At Location

Election Type: General Election

Election Date: 11/08/2022

Name of Location: CHANDLER UNIFIED SCHOOL DIST OFFICE #10003

Arrival Time: 2:37

Were there ballots to be picked up?



YES <If YES, complete lines 1-7



NO <If NO, complete lines 1-7

Spoils picked up?



YES



NONE

Completed Forms picked up?



YES



NONE

1) Blue Drop Box Seals # _____ & _____ <Indicate the seal numbers that were taken off on blue drop box

2) Blue Drop Box Seals # _____ & _____ <Indicate the seal numbers that were placed on blue drop box

3) Red Box Seals # IS 22013612 & IS 22013611 <Indicate the seal numbers that were placed on ballot transport box

4) Ballot Box Sealed/Checked on (Date) 11/5/22 (Time) 2:38 <Date and time box was sealed/checked

5) Location Staff Member (Signature) _____

6) Transport Staff Member (Signature) _____

7) Transport Staff Member (Signature) _____

Departure Time: 2:38

Transport Receipt

This portion to be completed by the Receiving Agent at the MCTEC Facility

Receiving Agent (Signature) _____

Sign to acknowledge receipt from Transport Staff Member

Date/Time: 11/5/22 5:20

Date of Audit Match

Ballot Box Seals # 1522013612 & 1522013611 <If applicable, verify the seal numbers on the box match the above from location

Blue Drop Box Seals # SEALS IN BOX 1 & _____ <Indicate the seal numbers that were broken from blue drop box

Count of Ballots in Transport Bin # 263

G-180 W-83

Audit Agent (Signature) _____

Sign to affirm seal #'s match or that no ballots were to be picked up

Date/Time: 11-5-22

Date of Audit Match

5:23pm

